## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10 457967

| CLAIMS AS FILED - PART I   |  |   |                    |                               |                       |                     |          | SMALL ENTITY TYPE  |                        |         | OTHER THAN OR SMALL ENTITY |                        |
|--|--|---|--------------------|-------------------------------|-----------------------|---------------------|----------|--------------------|------------------------|---------|----------------------------|------------------------|
| TOTAL CLAIMS   |  |   | (Column 1)<br>うく   |                               | (Column 2)            |                     | ,<br>    |                    |                        | OR      |                            |                        |
| TOTAL CLAIMO   |  |   | <b>グ</b> ト         |                               |                       |                     |          | RATE               | FEE                    |         | RATE                       | FEE                    |
| FOR  |  |   | NUMBER FILED       |                               |                       | ER EXTRA            |          | BASIC FEE          | 375.00                 | OR      | BASIC FEE                  | 750.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | 9 minus 20=        |                               | * 14                  |                     |          | X\$ 9=             |                        | OR      | X\$18=                     | 212                    |
| INDEPENDENT CLAIMS   |  |   | 5 minus 3 =        |                               | * 3                   |                     |          | X42=               |                        | OR      | X84=                       | 160                    |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |                    |                               |                       |                     | +140=    |                    | OR                     | +280=   |                            |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |   |                    |                               |                       |                     | L        | TOTAL              |                        | OR      | TOTAL                      |                        |
| CLAIMS AS AMENDED - PART II  |  |   |                    |                               |                       |                     |          | •                  |                        | •       | OTHER                      | THAN                   |
|  |  | (Column 1)                                |                    |                               | (Column 2) (Column 3) |                     |          | SMALL ENTITY       |                        |         | R SMALL ENTITY             |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                    | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY          | PRESENT<br>EXTRA    |          | RATE               | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus              | **                            |                       | =                   |          | X\$ 9=             |                        | OR      | X\$18=                     |                        |
|  | Independent                                    | *   | Minus              | ***                           | F.C.L.AJNA            | = [                 |          | X42=               |                        | OR      | X84=                       |                        |
| <u> </u>   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                    |                               |                       |                     |          | +140=              |                        | OR      | +280=                      |                        |
| ( , , =  |  |   |                    |                               |                       |                     | <u>.</u> | TOTAL<br>DDIT. FEE |                        | OR      | TOTAL<br>ADDIT, FEE        |                        |
|  |  | (Column 1)                                |                    | (Colu                         | mn 2)                 | (Column 3)          |          | .DDII. FEE (       |                        |         | ADDI1, 1°EE1               |                        |
| 8  |  | CLAIMS                                    | Allo Torres        | HIGH                          | IEST                  |                     | 1 [      | ——— <u> </u>       | ADDI-                  |         |                            | ADDI-                  |
| AMENDMENT  |  | REMAINING<br>AFTER<br>AMENDMENT           |                    | NUM<br>PREVIO<br>PAID         | OUSLY                 | PRESENT<br>EXTRA    |          | RATE               | TIONAL<br>FEE          |         | RATE                       | TIONAL<br>FEE          |
|  | Total  | *   | Minus              | **                            |                       | =                   |          | X\$ 9=             |                        | OR      | X\$18=                     |                        |
|  | Independent                                    | *   | Minus              | ***                           |                       | ]=                  |          | X42=               |                        | OR      | X84=                       |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                    |                               |                       |                     |          |                    |                        |         |                            |                        |
|  |  |   |                    |                               |                       |                     |          | +140=              |                        | OR      | +280=                      |                        |
|  |  | Α   | TOTAL<br>DDIT. FEE |                               | OR                    | TOTAL<br>ADDIT. FEE |          |                    |                        |         |                            |                        |
| (Column 1) (Column 2) (Column 3)   |  |   |                    |                               |                       |                     |          |                    |                        |         |                            |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                    | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY          | PRESENT<br>EXTRA    |          | RATE               | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus              | **                            | :*                    | =                   | 1 [      | X\$ 9=             |                        | OR      | X\$18=                     |                        |
|  | Independent                                    | *   | Minus              | ***                           |                       | -                   | ] [      | X42=               |                        | OR      | X84=                       |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                    |                               |                       |                     |          | +140=              |                        |         | +280=                      |                        |
|  |  | ımn 1 is less than t                      |                    |                               |                       |                     | L        | TOTAL              |                        | OR      | TOTAL                      |                        |
|  |  | mber Previously P<br>Imber Previously P   |                    |                               |                       |                     | ·" A     | DDIT. FEE          |                        | OR      | ADDIT. FEE                 | L                      |
|  |  | nber Previously Pa                        |                    |                               |                       |                     | er four  | nd in the app      | oropriate box          | ( in co | lumn 1.                    |                        |